

1.) CORPORATION NAME:

COOPER CARRY, INC.

DUE DATE: **1/31/2012**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

OFFICER

KEVIN CANTLEY

625 N WASHINGTON ST STE 200

ALEXANDRIA, VA 22314

SCC ID NO: **F1201195**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
COMMON	5,000,000
PREFER	1,000,000

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

ALEXANDRIA CITY

4.) STATE OR COUNTRY OF INCORPORATION:

GA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 191 PEACHTREE STREET NE
STE 2400

CITY/ST/ZIP: ATLANTA, GA 30303-

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

☒

OFFICER

☒

DIRECTOR

NAME: KEVIN R. CANTLEY
TITLE: PRESIDENT
ADDRESS: 191 PEACHTREE STREET NE
STE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

☒

OFFICER

☒

DIRECTOR

NAME: JEROME M. COOPER
TITLE: COB
ADDRESS: 191 PEACHTREE STREET NE
STE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

☐

OFFICER

☒

DIRECTOR

NAME: WALTER T CARRY
TITLE: DIRECTOR
ADDRESS: 191 PEACHTREE STREET NE
STE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

☐

OFFICER

☒

DIRECTOR

NAME: RICHARD FLIERL
TITLE: DIRECTOR
ADDRESS: 191 PEACHTREE ST NE
SUITE 2400
CITY/ST/ZIP/CO: ATLANTA, GA 30303-

NAME:	MARK JENSEN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	MARK KILL	<input checked="" type="checkbox"/> OFFICER	<input type="checkbox"/> DIRECTOR
TITLE:	COO		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	DAVID KITCHENS	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	SEAN MCLENDON	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	ROGER MILLER	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	VICE PRESIDENT		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	EDGAR MUSE	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	SECRETARY		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	ROBERT NEAL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	KEITH SIMMEL	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		
NAME:	ROB UHRIN	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	191 PEACHTREE ST NE SUITE 2400		
CITY/ST/ZIP/CO:	ATLANTA, GA 30303-		

NAME: BEN WAUFORD TITLE: DIRECTOR ADDRESS: 191 PEACHTREE ST NE SUITE 2400 CITY/ST/ZIP/CO: ATLANTA, GA 30303-	<input type="checkbox"/> OFFICER <input checked="" type="checkbox"/> DIRECTOR
NAME: SHERRY WILSON TITLE: VICE PRESIDENT ADDRESS: 191 PEACHTREE ST NE SUITE 2400 CITY/ST/ZIP/CO: ATLANTA, GA 30303-	<input checked="" type="checkbox"/> OFFICER <input type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.	
<u>/s/ SHERRY WILSON</u> SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	<u>SHERRY WILSON, VICE PRESIDENT</u> PRINTED NAME AND CORPORATE TITLE
<u>1/13/2012</u> DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.	